

**Maricopa County Adult Probation
Residential Substance Abuse Treatment for Probationers
Phoenix, Arizona
TI13111**

Authorized Representative

Barbara A. Broderick
Maricopa County Adult Probation
111 South 3rd Avenue, 3rd Floor
Phoenix, AZ 85003
(602) 506-3261
(602) 506-5952 fax
bbroderick@apd.maricopa.gov

Project Director

Kim O'Connor
Maricopa County Adult Probation
111 South 3rd Avenue, 3rd Floor
Phoenix, AZ 85003
(602) 506-3323
(602) 506-5952 fax
koconnor@apd.maricopa.gov

Evaluator

John R. Hepburn, PhD
School of Justice Studies
Arizona State University
Tempe, AZ 85287-0403
(480) 965-7085
(480) 965-9199 fax
john.hepburn@asu.edu

Contact

Michael Miller
3180 Biscayne Blvd.
Miami, FL 33137
(305) 571-2603
(305) 576-1348 fax
mmiller225@aol.com

SAMHSA Grants Specialist

Emmanuel Djokou
Rockwall II, Suite 630
5600 Fishers Lane
Rockville, MD 20857
(301) 443-1714
(301) 443-6468 fax
edjokou@samhsa.gov

CSAT Project Officer

Maria Burns
5600 Fishers Lane
Rockwall II, Suite 740
Rockville, MD 20852
(301) 443-7611
(301) 443-3543 fax
mburns@samhsa.gov

B&D ID

73002

PROJECT DESCRIPTION

Enhancement or Expansion—Expansion

Program Area Affiliation—Criminal Justice (abstract; page 13)

Congressional District and Congressperson—Arizona 1, 2, 3, 4, and 6; Jeff Flake (1), Ed Pastor (2), Bob Stump (3), John B. Shadegg (4), and J. D. Hayworth (6)

Public Health Region—IX

Purpose, Goals, and Objectives—The overall purpose is to expand community-based residential treatment services in Maricopa County to adult probationers. The primary goal is to improve social functioning and reduce or eliminate substance use among participants. To achieve the program goals, specific program objectives include increasing the number of treatment slots for this typically hard-to-reach client base of adult probationers. With an increase in treatment slots, the number of days probationers will serve in jail will be reduced because of a shorter pre-treatment waiting period. Increased participation in treatment will ultimately reduce the number of re-arrests among probationers. Participants will improve their social functioning and, as a result, improve their overall completion and treatment success rate. They also will experience a higher rate of success in completing probation and report higher rates of employment. (abstract, page 14)

Target Population—All Maricopa County adult probationers who require residential substance abuse treatment. Probationers will be mandated to enter treatment directly upon release from jail and will be under the supervision of a probation officer. (page 13)

Geographic Service Area—Adult probationers in Maricopa County who require residential substance abuse treatment. (page 13)

Drugs Addressed—Alcohol and all other illegal substances. (abstract; page 13)

Theoretical Model—Each of the three service providers uses a slightly different theoretical model for treatment. The Chicanos Por La Causa/Corazon program uses a combined family disease and cognitive model and employs a holistic approach in meeting client needs. The New Arizona Family, Inc. uses a cognitive social learning model that has as its core a comprehensive coping-skill treatment program. NOVA uses a step-down program model to assist the ongoing recovery of individuals who return to the community after residential treatment. (pages 19–23)

Type of Applicant—County

SERVICE PROVIDER STRUCTURE

Service Organizational Structure—The Probation Partnership to Expand Residential Treatment (PPERT) project involves the Maricopa County Adult Probation Department as the primary referral source that will partner with three community-based providers to expand residential treatment capacity for substance abusers on probation. The partnership will build on the existing infrastructure to increase the availability of services. The target population will be identified, assessed, and referred through the existing Reach Out Program operated by the Adult Probation

Department. The Maricopa County Adult Probation Department has successfully managed several federally funded grant projects for adult probationers in need of treatment services. (page 15)

Service Providers—The actual service providers are the Chicanos Por La Causa/Corazon; New Arizona Family, Inc., Women’s Treatment Center; and the NOVA/Maverick House. Each of the three service providers has extensive experience serving probationers and clients with special needs. (pages 19–22)

Services Provided—Specific services include individual, group, and family counseling; multiple-family counseling, education, vocational skill development, and aftercare; self-help and study groups; coping skills; wellness/nutritional, health, and reproductive education; methadone treatment; independent living skills; and continuing care and aftercare. (pages 19–22)

Service Setting—All services are to be provided within a residential treatment setting. (pages 19–22)

Number of Persons Served—The project will add at least 50 residential treatment beds per year for this specific client base (adult probationers). (abstract; page 14)

Desired Project Outputs—The desired outputs are detailed in the goals and objectives described earlier. In summary, these include the expansion of at least 50 residential treatment spaces for adult probationers who have a serious substance use problem. (page 14)

Consumer Involvement—Consumer involvement includes the completion of consumer satisfaction surveys and consumer focus groups to assist providers with quality management and program planning. In addition, program alumni participate on the advisory board, and clients are involved in staffing and individual treatment planning and project improvement teams. (pages 23–24)

EVALUATION

Strategy and Design—The program evaluation incorporates a quantitative and qualitative formative evaluation research design. The evaluation combines a documentation study of the implementation processes with an outcome study that examines program effectiveness. The design ensures the involvement of both stakeholders and consumers. The design is also sensitive to ethnic and cultural differences within the population, and the measures and outcomes are relevant to the unique problems of the target population. Data will be collected at baseline and 6- and 12-month follow-up. (pages 24–27)

Evaluation Goals/Desired Results—The primary goal of the evaluation is to assess the process and the impact of the expanded capacity for residential treatment within the PPERT project. The formative evaluation strategy to be employed will ultimately provide the assessment necessary to make informed policy decisions. The project goals and objectives not only delineate treatment goals but also suggest evaluation through the specific anticipated outcomes, such as criminal justice, alcohol and other drugs, and social and employment outcomes. (pages 24–27)

Evaluation Questions and Variables—There are three evaluation questions addressed in the research design: (1) What procedures are used by the PPERT project to ensure proper and

efficient use of its expanded capacity for residential treatment? (2) Does the expanded capacity for residential treatment improve access to residential treatment? (3) Does the expanded capacity improve the outcomes of participants?

The documentation study will examine quantitative data extracted from client records to assess the extent to which the program (1) increased the likelihood that clients are placed in residential treatment; (2) decreased the length of time to wait for treatment; and (3) decreased the number of jail days served. Other client data include length of time in treatment, involvement in treatment, termination status, and prognosis at termination. In addition, qualitative data will be collected from on-site observations, staff and stakeholder interviews, and client feedback.

The outcome study will examine client demographic characteristics and criminal justice history. Other data to be examined include criminal justice factors associated with use of alcohol and illegal drugs and criminal activities, and social and employment variables that measure social functioning, family stability and integration, physical health and at-risk behaviors, and mental health status. (pages 24–28)

Instruments and Data Management—Most baseline data are extracted from client records; any additional baseline data are obtained from residential treatment providers' assessment instruments and the Government Performance Results Act (of 1993) outcome tool. Program and outcome data collection instruments will be developed during Phase I, the documentation study. A documentation manual detailing all protocols, instruments, and related study materials will be developed and reviewed during Phase I. Data analysis will be conducted using a t-test of differences between relevant comparison groups to measure effects on each outcome variable. Multivariate regressions will be used to examine independent and additive effects of antecedent and program factors on the criminal justice and social outcome variables. (pages 26, 28)